Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals & Natural Resources Department

Form C-103

Revised 1-1-89

| DISTRICT I<br>1625 French Drive Hobbs, NM 88240   | OIL CONSERVATION DIVISION                                      |                      | 30-025-33207  |  |
|---|--|----------------------|---|--|
| P. O. Box 2088  |  |                      | 5. Indicate Type of Lease                             |  |
| DISTRICT II P. O. Drawer DD, Artesia, NM 88210  |  |                      | STATE FEE   |  |
| DISTRICT III  | TRICT III  |                      | 6. State Oil & Gas Lease No.                          |  |
| 1000 Rio Brazos Rd., Aztec, NM 87410  |  |                      |   |  |
| SUNDRY NOTICES AND REPORTS ON WELLS   |  |                      |   |  |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A   |  |                      | 7. Lease Name or Unit Agreement Name                  |  |
| DIFFERENT RESERVOIR, USE "APPLICATION FOR PERMIT"   |  |                      | Maljamar Grayburg Unit                                |  |
| (FORM C-101) FOR SUCH PROPOSALS.)   |  |                      |   |  |
| OIL GAS WELL  | GAS  |                      | -   |  |
| 2. Name of Operator   |  |                      | 8. Well No.   |  |
| The Wiser Oil Company   |  |                      | 79  |  |
| 3. Address of Operator P.O. Box 2568 Hobbs, New Mexico (505) 392-9797   |  |                      | 9. Pool name or Wildcat  Maljamar Grayburg San Andres |  |
| 4. Well Location (303) 392-9797   |  |                      | Mananai Grayourg San Andres                           |  |
| Unit Letter <u>C</u> : 1300   | Feet From The North  | Line and1417         | _ Feet From The Line                                  |  |
| Section 4 Towns   | hip 17S Range  | 32E                  | NMPM Lea County                                       |  |
| Towns   | 10. Elevation (Show whether                                    |                      | NMPM Lea County                                       |  |
| 4164' GR  |  |                      |   |  |
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data   |  |                      |   |  |
| NOTICE OF INTENTION TO SUBS   |  | EQUENT REPORT OF:    |   |  |
| PERFORM REMEDIAL WORK   | PLUG AND ABANDON   | REMEDIAL WORK        | ALTERING CASING                                       |  |
| TEMPORARILY ABANDON   | CHANGE PLANS   | COMMENCE DRILLING    | OPNS. PLUG AND ABANDONMENT                            |  |
| PULL OR ALTER CASING  |  | CASING TEST AND CEMI | ENT JOB   |  |
| OTHER:  |  | OTHER: Spot converte | er & re-acidize                                       |  |
| 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.  |  |                      |   |  |
| 08/16/02 MIRU Eunice Well Service. POH w/rods. ND WH. RU BOP. POH w/2-3/8" tbg. RIH w/4-3/4" bit, scraper, SN & 2-3/8" tbg. to 4050'. Circulate hole clean w/140 bbls. soapy water. POH w/2-3/8" tbg. LD tools. RIH w/2-3/8" x 5-1/2" AD-1 pkr. & spot control valve on 2-3/8" tbg. to 4030'. Spot 165 gals. Pro-Kem scale converter across Grayburg perfs. 3871'-4030'. Set pkr. @ 3800'.  |  |                      |   |  |
| 08/19/02 Pressure test tbg. to 3500#. Circulate hole clean w/100 bbls. soapy water. RU Cudd Pressure & pickle tbg.w/300 gals. 15% HCL acid. Spot 3 bbls. 15% HCL acid across Grayburg perfs. 3871'-4030'. Set pkr. @ 3800'. Acidized Grayburg 3871'-4030' w/3000 gals. 15% HCL acid w/iron and sludge control ASA-290. Blocked w/1300# rock salt. Best block 500#. Best break 600#. ATP 3070# @ 3.2 bpm. MTP 3400# @ 3.5 bpm. ISIP 2660#. 5 min. 2460#. 10 min. 2290#. 15 min. 2120#. 1 hr. SI 1820#. |  |                      |   |  |
| 08/20/02 ND flowline. POH w/2-3/8" tbg. LD tools. RIH w/2-3/8" IPC tbg. Tbg. @ 4093'. SN @ 4062'. RD BOP. NU WH. RIH w/rods & 1-1/2" x 16' pump. Left well pumping to Battery. RDMO.  |  |                      |   |  |
|   |  |                      |   |  |
|   |  |                      |   |  |
|   |  |                      |   |  |
|   |  |                      |   |  |
|   |  |                      |   |  |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.  |  |                      |   |  |
|   |  |                      |   |  |
| TYPE OR PRINT NAME Mary Jo Turner   |  | TITLEProduction Tecl | DATE October 6, 2002 TELEPHONE NO. (505) 392-9797     |  |
| (This space for State Use)  |  |                      |   |  |
| APPROVED BY   | ORIGINAL SIGN  |                      | DATE NOV 2 2 2002                                     |  |
| CONDITIONS OF APPROVAL, IF ANY:  GARY W. WINK  OC FIELD ET LILLES JATIVE 11/STAFF MARKEY PR   |  |                      |   |  |
|   | OC PRIO COLUMNIA MARANTANA AND AND AND AND AND AND AND AND AND |                      |   |  |